

APHIS Partnership In Education Headquarters & Field Outreach Participation Form

2004-2005 School Year http://www.aphis.usda.gov/mb/mrphr/4630sdsf.html#introduction.

Employee Name:	
Employee Work Address: (please include Program and unit number)	
Phone Number:	
Name & Address of School:_	
Name of School's Volunteer Coordinator & Pho	one Number
Frequency of Visits:	Weekly Bi-Weekly Other; Please explain
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Type of Volunteer Effort:	Mentor One-on-One Tutor One-on-One
	Tutor Multiple Students Teacher's Aide
	Other; Please explain:

Number of Students: (Please estimate the number of children you will work with we will track this at the end of the school year as it relates to our pledge to America's Promise.)
Grade(s) of Students (e.g., 5th grade):
I have discussed this with my supervisor and he/she concurs with my participation
Supervisor's Name (Printed):
Supervisor's Signature & Date:

After completing this form, please return this and a Memorandum of Understanding with your school (unless you have submitted one for your school in past years) to:

Carmen Queen-Hines MRP Business Services, Human Resources Division 4700 River Road, Unit 21, Suite6D42 Riverdale, MD 20737 FAX 301-734-5100

